Continuous Glucose Monitoring (CGM) and external Insulin Pumps

Adjudication Guideline

Rule Category: Medical	**Ref: No:** 2023-MN-0071	**Version Control:** Version No.7.0	**Effective Date:** 19/02/2024	**Revision Date:** 14/09/2026
Approved by: Daman	**Responsible:** Medical Standards & Governance	**Related Adjudication Guidelines:** N/A		

Table of Contents

1. Abstract

1.1 For Members

Continuous Glucose Monitoring System (CGM)

CGM stands for Continuous Glucose Monitoring. It is a system that provides real-time information about a patient's glucose levels throughout the day and night. A small sensor is inserted under the patient's skin, usually on the abdomen or arm, to measure interstitial fluid glucose levels. This data is then transmitted wirelessly to a display device, such as a smartphone or insulin pump, allowing the patient to monitor their glucose levels continuously.

It is important to note that specific criteria for CGM indication may vary depending on the healthcare provider, regional guidelines, and individual patient needs.

External Insulin pump:

An external insulin pump is a medical device used by individuals with diabetes to administer insulin in a controlled manner.

Using an external insulin pump should be made in consultation with a healthcare provider who specializes in diabetes management. They will assess the individual's specific medical history, lifestyle, and needs to determine if an external insulin pump is the most appropriate treatment option.

The specific requirements and coverage criteria of the patient's insurance provider must be met, which may include prior authorization, clinical review, or additional documentation as requested.

1.2 For Medical Professionals

Continuous Glucose Monitoring System (CGMS)

A minimally invasive, continuous glucose monitoring system (CGMS) is considered medically necessary for the management of difficult to control insulin-treated diabetes mellitus (e.g., hypo- or hyperglycemic episodes unresponsive to adjustments in therapy, asymptomatic nocturnal hypoglycemia) for up to 14 days under the core medical benefits of the plan.

External Insulin Pumps

External insulin pump is considered medically necessary for the management of type 1 and type 2 diabetes with long term use of insulin.

Types of Continuous glucose monitors CGM (monitoring, sensors, and pump devices) and external insulin pump:

2. Scope

The scope of the guideline for Continuous Glucose Monitors (CGMs) and insulin pump refers to the specific recommendations and best practices for the use and management of CGMs and insulin pumps in the treatment and management of diabetes.

2.1 Overview

- **Continuous Glucose Monitoring System (CGMs)**

Continuous glucose monitors (CGMs) are devices that for monitoring glucose levels in diabetics. It consists of a sensor applied to the skin that measures glucose levels continuously in interstitial fluid. Data is sent to a receiver or smartphone for real-time tracking without fingerstick tests.

- **External Insulin Pumps**

External insulin pump is considered medically necessary for the management of type 1 and type 2 diabetes with long term use of insulin.

2.2 Coverage criteria:

Continuous Glucose Monitoring is recommended for diabetes as per the criteria below:

1. Type 1 Diabetes all adults and children
2. Type 2 Diabetes on multiple daily insulin injections if any of the following apply*:*
    - They have recurrent hypoglycemia or severe hypoglycemia
    - They have impaired hypoglycemia awareness.
    - They have a condition or disability (including a learning disability or cognitive impairment) that means they cannot self-monitor their blood glucose by capillary blood glucose monitoring.
3. Diabetes in Pregnancy:

- CGM is recommended to all women with type 1 diabetes.
- CGM is recommended to pregnant women who or on insulin therapy.

External Insulin pumps is recommended for type 1 diabetes adults and children.

2.3 Types of CGM and external insulin pumps

Types of Continuous glucose monitors CGM (monitoring, sensors, and pump devices) and external insulin pump:

Freestyle Libre

Continuous glucose monitoring (CGM) device for monitoring glucose levels in diabetics. It consists of a sensor applied to the skin that measures glucose levels continuously in interstitial fluid. Data is sent to a receiver or smartphone for real-time tracking without fingerstick tests.

Types of CGM	Medical indications	Age	Exclusion criteria	Code	Frequency
Freestyle Libre *Monitoring device* 	Type 1 DM **OR** Type 2 DM on multiple daily insulin injections with indications specified under the scope section. **OR** Pregnant women who are on insulin therapy.	6 years and older	Patients who have skin irritations and allergies.	**A9276** Sensor Free style libre 1	1 sensor/14 days
				Free style libre 2 plus	1 sensor/15 days
				A9278 Receiver	1 every 4 years

Sibionic C1

Continuous glucose monitoring (CGM) device includes sensors and transmitter to monitor glucose levels continuously.

Types of CGM	Medical indications	Age	Exclusion criteria	Code	Frequency
Sibionics GS1 *Monitoring device* 	Type 1 DM **OR** Type 2 DM on multiple daily insulin injections with indications specified under the scope section. **OR** Pregnant women who are on insulin therapy.	3 years and above	People who regularly require less than 0.1 U/h of basal insulin	**A9276** Sensor	Every 14 days

Sinocare ican i6

Sinocare device, it is usually a blood glucose monitoring device (glucometer) used by people with diabetes to measure blood sugar levels as CGM.

Type of CGM	Medical Indication	Age	Exclusion Criteria	Code	Frequency
Sinocare ican i6 Continuous Glucose Monitoring (CGM) 	Same above criteria	2 years and above	Patients who have skin irritation or allergies	A9277 Sensor	1 sensor every 15 days, with a maximum limit of 24 sensors per patient per year

Dexcom

The device that tracks the glucose levels continuously throughout the day and night, to measures glucose levels up to every five minutes using a sensor inserted just underneath the skin and wirelessly transmits glucose readings to a receiver.

Types of CGM	Medical indications	Age	Exclusion criteria	Code	Frequency
Dexcom *Monitoring device*  Sensors:  	Patient with Type-1 diabetes on intensive multiple insulin injection regimen **AND** Can't tolerate or use libre-Free style sensor due to associated moderate Or severe contact allergy/dermatitis at the sensor applications sites	2 years old and above	Diabetics patients on Free style or Medtronic Insulin pump should continue to utilize the Medtronic sensor system.	**K0553** **G7** sensor (1 box-1 sensor)	1 sensor every 10 days = 3 boxes every month
				K0554 Receiver (monitor)	1 every 4 years
				A9277 Transmitter	4 per one year

Accu-Chek SmartGuide Continuous Glucose Monitor (CGM):

Type of CGM	Medical indication	Age	Exclusion Criteria	Code	Frequency
Accu-Chek Smart Guide Continuous Glucose Monitor (CGM) *monitoring device* 	Patients with Type 1 Diabetes Mellitus. OR Patients with Type 2 Diabetes Mellitus on multiple daily insulin injections (as defined under the scope). OR Pregnant women on insulin therapy.	18 years and above	Patients who have skin irritation or allergies	**A9276** Sensor	every 14 days

OMNIPOD

Omnipod provides non-stop insulin delivery through an insulin pump with no multiple daily injections. Get up to 3 days (72 hours) of continuous insulin delivery.

Two models : Omnipod Dash and Ominpod 5 system
Cannot be used as a continuous glucose monitor

Type of CGM	Medical indications	Age	Exclusion Criteria	Code	Frequency
Omnipod *Insulin pump only* 	Type-1 diabetes	**Omnipod DASH** All ages	Exclude patients with medical complications e.g., renal, cardiac, and neuropathic diseases	**E0784** External ambulatory infusion pump	1 per 4 years
				A9274 External ambulatory insulin delivery system	12 per year

Omnipod 5 Automated Insulin Delivery (AID) System:

This product builds on the tubeless insulin delivery offered by its predecessor, it include a Pod worn on your body that can deliver continuous insulin for up to three days. However, the Omnipod 5 is fully automated and compatible with the Dexcom® G6 Continuous Glucose Monitor System, allowing people with diabetes to avoid highs and lows.

Type of CGM	Medical indication	Age	Exclusion Criteria	Code	Frequency
Omnipod 5 Automated Insulin Delivery (AID) System Insulin Pump with CGM (DexcomG7 or Libre freestyle 2 Plus/3)  	Type 1 Diabetes Mellitus.	2 years and above	Exclude Patient with Medical Complication e.g Renal, Cardiac and Nephropathic Disease	**E0784** External ambulatory infusion pump	1 per 4 years
				A9274 External ambulatory insulin delivery system	10 pods (1 box) every 1 month

Medtronic:

Type of insulin pump that is used by individuals with diabetes to deliver insulin continuously throughout the day, provides a variety of infusion sets to fit patient needs.
Medtronic does offer continuous glucose monitoring (CGM) systems

Types of CGM	Medical indications	Age	Exclusion criteria	Code	Frequency
Medtronic MiniMed *Insulin pump with CGM* 	Type 1 DM	2 years and older	Exclude patients who require less than eight units or more than 250 units of insulin a day.	**S1034** Insulin Pump	1 per 4 years
				S1036 Transmitter	1 every year
				S1035 Sensor	1 every month
				A9277 Transmitter	1 every month
				A4230 Infusion set for external insulin pump	1 every month
				A4232 Reservoir; Syringe with needle for external insulin pump	1 every month

EO Patch

EO Patch is an external insulin injection device that automatically injects insulin from the outside of the body to control blood glucose levels for the treatment of diabetes.

Patch can provide sustained infusion of insulin throughout the day (basal) and/or infuse additional amount of insulin over a short period of time (bolus).

Types of CGM	Medical indications	Age	Exclusion criteria	Code	Frequency
EO Patch *External insulin injection*  	Type 1 DM	6 years and above	People who regularly require less than 0.1 U/h of basal insulin	**A9274** External ambulatory insulin delivery system	1 every month (12 a year)

3. Adjudication Policy

3.1 Eligibility / Coverage Criteria

- Thiqa: covered.
- Enhanced: Covered, if with "Medical appliances and Medical equipment" benefit.
- Basic: Not covered

3.2 Requirements for Coverage

The specific requirements and coverage criteria of the patient's insurance provider must be met, which may include prior authorization, clinical review, or additional documentation as requested.

- CGM products should be dispensed from OP pharmacies.
- Prior authorization is mandatory for all claims for CGM devices, sensors and insulin pump.
- Abudhabi, Dubai and Norther Emirates network providers should follow the above HCPCS codes
- For the HCPCS code used for different products, providers are requested to valid LPO must be uploaded
- Providers should include the name of the product or the subcodes in the observation field of the electronic submission for codes in order to differentiate between the codes used for different products. *(Refer to relevant circulars in OpenJet)*

3.3 Additional Information

- Dexcom G6 sensor was replaced by Dexcom G7 sensor.
- Accu Check solo and Accu Check combo were discontinued in market.
- Patients who have Medtronic MiniMed are not eligible for other CGM.

3.4 Non-Coverage

- Non-diabetic patient
- Visitor plan
- Policies with no Medical appliances and equipment benefits.

3.5 Payment and Coding Rules

Kindly apply Regulator payment rules and regulations and relevant coding manuals for ICD, Drugs.

4. Denial Codes

Code	Code Description
CODE-010	Activity/diagnosis inconsistent with clinician specialty
MNEC-004	Service is not clinically indicated based on good clinical practice
MNEC-003	Diagnoses are not covered
AUTH-001	Prior approval is required and was not obtained

5. Appendices

5.1 References

- Approved HTA Medical Products
- https://www.medtronic.com/content/dam/medtronic-wide/public/canada/products/diabetes/780g-gs3-system-user-guide.pdf
- SIBIONICS CGM Continuous Glucose Monitoring System
- Simplify Life with Omnipod® 5
- Omnipod DASH® Insulin Management System
- PRODUCT | EOFLOW – EO Patch
- Health Technology Review Freestyle Libre Plus2
- Study Details | NCT05574062 | Evaluation of the MiniMed 780 System in Paediatric Subjects | ClinicalTrials.gov
- https://www.accessdata.fda.gov/cdrh_docs/pdf16/P160017S091B.pdf
- https://www.doh.gov.ae/-/media/Feature/Research/Technology-status/Accu-Chek-Solo-Patch-Pump.ashx
- https://www.dexcom.com/en-nz/safety-information
- https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8097502/

- https://www.accessdata.fda.gov/cdrh_docs/reviews/DEN170088.pdf
- https://www.omnipod.com/safety
- https://www.doh.gov.ae/en/research/Technology-Registry
- https://bestpractice.bmj.com/topics/en-gb/24/monitoring
- https://www.nice.org.uk/guidance/ng28
- https://www.nice.org.uk/guidance/ng3
- https://diabetesjournals.org/care/article/46/Supplement_1/S111/148041/7-Diabetes-Technology-Standards-of-Care-in
- https://www.nice.org.uk/guidance/ng17/resources/type-1-diabetes-in-adults-diagnosis-and-management-pdf-1837276469701
- https://en.sinocare.com/

5.2 Revision History

Date	Version No.	Change(s)
18/02/2024	V1	New version
20/01/2025	V2	Updated-Device age
07/05/2025	V2.1	Updated-Device age
01/08/2025	V3	Updated frequency of CGM appliances
19/11/2025	V4	Product pictures Product generation type Update age and frequency Requirements Remove Accu check solo
05/12/2025	V5	Sibonic CGM age update
24/4/2026	V6	To add Accu-Chek SmartGuide Continuous Glucose Monitor (CGM), and Omnipod 5 Automated Insulin Delivery (AID) System as per DOH Circulars.
14/9/2026	V7	Requirement for coverage updates Add the updated Age of Medtronic MiniMed and Dexcom Add new CGM device -Sinocare

Disclaimer

By accessing these Daman Adjudication Guidelines, you acknowledge that you have read and understood the terms of use set out in the disclaimer below:
The information contained in this Adjudication Guideline is intended to outline the procedures of adjudication of medical claims as applied by the National Health Insurance Company – Daman PJSC (hereinafter "Daman"). The Adjudication Guideline is not intended to be comprehensive, should not be used as treatment guidelines and should only be used for the purpose of reference or guidance for adjudication procedures and shall not be construed as conclusive. Daman in no way interferes with the treatment of patient and will not bear any responsibility for treatment decisions interpreted through Daman Adjudication Guideline. Treatment of patient is and remains at all times the sole responsibility of the treating Healthcare Provider. This Adjudication Guideline does not grant any rights or impose obligations on Daman. The Adjudication Guideline and all of the information it contains are provided "as is" without warranties of any kind, whether express or implied which are hereby expressly disclaimed.
Under no circumstances will Daman be liable to any person or business entity for any direct, indirect, special, incidental, consequential, or other damages arising out of any use of, access to, or inability to use or access to, or reliance on this Adjudication Guideline including but without limitation to, any loss of profits, business interruption, or loss of programs or information, even if Daman has been specifically advised of the possibility of such damages. Daman also disclaims all liability for any material contained in other websites linked to Daman website.
This Adjudication Guideline is subject to the laws, decrees, circulars and regulations of Abu Dhabi and UAE. Any information provided herein is general and is not intended to replace or supersede any laws or regulations related to the Adjudication Guideline as enforced in the UAE issued by any governmental entity or regulatory authority, or any other written document governing the relationship between Daman and its contracting parties.

This Adjudication Guideline incorporates the Current Procedural Terminology (CPT®), which is a registered trademark of the American Medical Association ("AMA") and the CPT codes and descriptions belong to the AMA. Daman reserves the right to modify, alter, amend or obsolete the Adjudication Guideline at any time by providing one month prior notice.